



CODE OF CONDUCT

The Code of Conduct of LSU Health Shreveport provides the guiding standards for the decisions and actions of employees and affiliates. Although this Code can neither cover every situation in the daily conduct of the many varied activities nor substitute for common sense, individual judgment or personal integrity, it is the duty of each employee and affiliate of LSU Health Shreveport to adhere, without exception, to the principles set forth herein, and comply with the terms of this Code of Conduct.

I shall conduct all activities in a manner that will promote integrity and compliance while practicing sound ethical and professional judgment. I shall abide by regulations set forth by state and federal healthcare programs and their appointed agents in conjunction with the policies and procedures established by LSU Health Shreveport.

I shall prepare and complete accurate medical records, student records, financial information, and bills. I understand that I am directly responsible for the accuracy and completeness of data entries which are entered into LSU Health Shreveport computer systems.

I shall report suspected non-compliant behavior that violates any statute, regulation, or guideline applicable to a state or Federal healthcare program or policy. I have the right to remain anonymous when reporting and all reports are confidential.

As an employee and/or affiliate I will not be retaliated against for reporting suspect behaviors in any form or fashion.

I shall disclose to the compliance officer any information received from state or federal healthcare programs or their agents upon receipt. I will participate in any reviews, investigations, or audits whether conducted by an internal or external agency.

I shall refuse any type of illegal offers, remuneration, or payments to induce referrals or preferential treatment from a third party.

LSU Health Shreveport has a legal and ethical responsibility to safeguard the privacy of all patients and students and protect information that is defined as confidential.

Confidential information includes information contained in manual documentation as well as information stored in the facilities' computer systems. Patient, student, personnel, financial, and other business records contain confidential information. I understand that information regarded as confidential must be maintained in the strictest of confidence. Release of information must be provided by the appropriate, authorized personnel. I shall not disclose confidential information to any person, other than as necessary in the course of my affiliation with LSU Health Shreveport.

Institutional computer systems and the data in those systems may be accessed only by authorization from Administration. I shall not reveal user identification codes or passwords or use another employee's user identification code/password. Additional Security violations may include, but are not limited to, failing to sign off when leaving the computer unattended; modifying my own medical or employment record; requesting that another employee access my employment or medical record; allowing another employee to use my password; accessing medical or employment records without having a legitimate reason; allowing anyone else to view confidential information while I am signed on to a computer system; using another employee's access code; or revealing confidential information or business/financial details of patients and/or employees.

All privacy and security violations should be reported to the Compliance Office and such incidents will be investigated.

I shall complete the mandated LSU Health Shreveport annual training requirements.

All employees shall adhere to the Code of Conduct as a condition of employment. All employees and affiliated professionals can be suspended, terminated, or barred from further employment or affiliation with LSU Health Shreveport as a result of non-compliant behavior. The failure to abide by this agreement may result in legal action, including possible fines and/or imprisonment in accordance with applicable Louisiana State and Federal Law.

My signature below indicates that I acknowledge and confirm my understanding of the terms of the LSU Health Shreveport Code of Conduct.

PRINTED NAME

SIGNATURE

DATE